

Application No. (if known): 10/617,168

Attorney Docket No.: 04558/038002

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Request for Certificate of Correction (No Fee) (2 pages)
Certificate of Correction

**UNITED STATES PATENT AND TRADEMARK OFFICE
CERTIFICATE OF CORRECTION**

PATENT NO. : 6,819,647
DATED : November 16, 2004
INVENTOR(S) : Youichi Saitoh et al.

Ok to be sent to you
9/12/07

It is certified that error appears in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

In Claim 4, column 2, line 8, please replace the word "omitted" with --emitted--.

In Claim 4, column 2, line 13, please add the following sentence: --first photodetectors for receiving light separated by the separation element;--

In Claim 3, column 2, line 1, please replace the mathematical equation " $(N1 + \frac{1}{4}) \lambda 1 \approx N2 \times \lambda 2$ " with -- $(N1 + \frac{1}{4}) \lambda 1 \overset{\text{---}}{=} N2 \times \lambda 2$ --.

In Claim 6, column 2, line 41, please replace the mathematical equation " $(N1 + 1/5) \approx N2 \times \lambda 2$ " with -- $(N1 + 1/5) \lambda 1 \overset{\text{---}}{=} N2 \times \lambda 2$ --.

SPE RESPONSE FOR CERTIFICATE OF CORRECTION

Paper No.: X

DATE : APRIL 28, 2005

TO SPE OF : ART UNIT 2655

SUBJECT : Request for Certificate of Correction for Appl. No.: 10617168 Patent No.: 6819647B2

A response is requested with respect to a request for a certificate of correction.

With respect to the change(s) requested to correct Office and/or Applicant's errors, should the patent read as shown in the certificate of correction attached herewith or the COCIN document(s), in IFW images for the above-identified patented application? No new matter should be introduced, nor should the scope or meaning of the claims be changed.

If the response is for an IFW, within 7 days, please complete and forward the response, to the employee (named below) via scanning into application images, using document code **COCX**.

DO NOT SENT TO ATTORNEY

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Palm Location 7580

VIRGINIA TOLBERT
Certificates of Correction Branch

703-308-9390 ext. 113

Thank You For Your Assistance

The request for issuing the above-identified correction(s) is hereby:

Note your decision on the appropriate box.

Approved

All changes apply.

Approved in Part

Specify below which changes do not apply.

Denied

(corrections) State the reasons for denial below.

Comments: The amendment to the claims are approved by
the examiner.

SPE

Art Unit